THE UNIVERSITY OF MEMPHIS

Graduate Schoo

Return COMPLETED To:

Graduate Admissions
FedEx Inst. of Technology Bldg, Suite 201
University of Memphis
Memphis, TN 38152

Phone: (901) 678-3685; Fax: (901) 678-0378 Email:

graduateadmissions@memphis.edu

GRADUATE ADMISSIONS

Academic Program / Semester Update Form

(This form is interactive).

This form is used to change the term or concentration either within an *applicant's* submitted application, or within a *student's* existing academic program (into which they have been accepted), or for a student to reapply for admission if they applied using Banner's legacy application system (student does not have a CAS ID).

UID: U	or Applicant CAS ID# Telephone Number:		Telephone Number:
Last Name: First		st Name:	Middle Initial:
Email Address:	Addre	ess:	
Complete the section below that your starting	t matches your request to 1) semester. Signatures are re	add/readmit/change a pr quired before submitting	ogram, 2) drop a program or 3) chang to Grad Admissions.
1) ADD/READMIT/CHANGE P	ROGRAM	2) DROP PROGRA	AM
Department:		Department:	
Degree:		Degree:	
Major/Certificate:		Major/Certificate:	
Concentration:			
Online Only? Yes No			Year:
Effective: Semester:	Year:		
Will you complete your current de	gree program(s)? Yes	No N/A If ye	es, when?
3) CHANGE STARTING SEMESTER		ADDITIONAL COMMENTS	
Changing Start Semester? Ye	es No		
Change Semester to:	Change Year to:		
Degree:			
Major/Certificate:			
Student Signature:			Date:
	(Sign)	(Print)	
APPROVAL:			
Department Signature:	(Sign)	(Print)	Date:
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By signing this form, the student agrees to meet all departmental and university requirements and procedures for admission, readmission, dropping a program or changing the term for which he or she chooses to begin enrollment.